

**DEPARTMENT OF CHARITABLE GAMING
REPORT OF GAME TERMINATION**

General Instructions

An organization that voluntarily ceases to game is required by Department regulation to file an annual financial report by March 15th of each year until all gaming proceeds are depleted in accordance with Virginia law and Department regulations. If gaming will be resumed at a later date and the permit has expired, a new license to conduct charitable gaming must be applied for and obtained.

- A. Please use this form to notify the Department that your gaming operations have ceased.
- B. Complete the entire form. DO NOT LEAVE ANY BLANKS.
- C. Place "N/A" if item is not applicable. **Please type or print all answers.** Do not use pencil.
- D. If needed, attach additional documents or explanation sheets.
- E. Ensure Report of Game Termination is signed and dated.
- F. Enclose original charitable gaming permit.
- G. Retain a copy for your records.

ORGANIZATION INFORMATION

1.	Organization Name: _____	DCG No. _____
	Mailing Address: _____	
	City: _____	State: _____ Zip Code: _____
	Telephone No.: () _____	E-Mail: _____
2.	Date Game Termination Effective: _____	
3.	Game Termination is: Permanent: _____	Temporary Until: _____
4.	Physical Location of the Gaming Activity:	
	Facility Name, if applicable: _____	
	Physical Address: _____	
	City: _____	State: _____ Zip Code: _____
5.	Please provide primary reason(s) for ceasing gaming: _____	

4.	Full name of person responsible for filing financial reports: _____	
	Address: _____	
	City: _____	State: _____ Zip Code: _____
	Home Telephone No.: () _____	Work Telephone No.: () _____
	Facsimile No. () _____	E-Mail: _____

REQUESTED BY

Signature: _____	Date: _____
Full Name: _____	Position: _____
First Name Middle Name Last Name	

**MAIL COMPLETED FORM TO: Department of Charitable Gaming, 101 North 14th Street, 17th Floor,
James Monroe Building, Richmond, Virginia 23219**

For more information, please visit our web site at www.dcg.virginia.gov or contact the Department at (804) 786-1681.